

PATENT RESPONSE UNDER 37 CFR 1.116 EXPEDITED PROCEDURE EXAMINING GROUP 2816

THE UNITED STATES PATENT AND TRADEMARK OFFICE

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on March 2, 2004.

Appl No.

: 10/043,763

Confirmation No. 7260

Applicant

: Janardhanan S. Ajit

Filed

: January 9, 2002

Title

: SUB-MICRON HIGH INPUT VOLTAGE TOLERANT INPUT OUTPUT

(I/O) CIRCUIT WHICH ACCOMMODATES LARGE POWER SUPPLY

VARIATIONS

TC/A.U.

: 2816

Examiner

: Terry D. Cunningham

Docket No. : 41980/RJP/B600

Customer No.: 23363

AMENDMENT AFTER FINAL ACTION

Mail Stop AF

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Post Office Box 7068

Pasadena, CA 91109-7068

March 2, 2004

Commissioner:

In response to the Office action of January 12, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Amendments to the Drawings begin on page 9 of this paper and include an attached replacement sheet.

Remarks/Arguments begin on page 10 of this paper.

mage AF/28/6



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE AMENDMENT TRANSMITTAL LETTER

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Signature

Applicant

: Janardhanan S. Ajit

Application No.

: 10/043,763

Filed

: January 9, 2002

Title

: SUB-MICRON HIGH INPUT VOLTAGE TOLERANT INPUT OUTPUT (I/O)

CIRCUIT WHICH ACCOMMODATES LARGE POWER SUPPLY

VARIATIONS

Grp./Div.

: 2816

Examiner

: Terry D. Cunningham

Docket No.

: 41980/RJP/B600

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

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Pasadena, CA 91109-7068

March 2, 2004

Commissioner:

Enclosed is an amendment to the above-identified application.

	Claims Remaining After Amendment	Highest Number Paid For	Number Extra Claims	Small Entity Rate	Large Entity Rate	FEE
Total Claims Fee	13	*22	0	x \$9.00	x \$18.00	(
Independent Claims	7	** 11	0	x \$43.00	x \$86.00	(
Multiple Dependent Claims ***				\$145.00	\$290.00	C
TOTAL FILING FEE						C
NO ADDITIONAL FEE REQUIRED ****	IF NO FEE REQUIRED, INSERT "0"					C

LIST INDEPENDENT CLAIMS: 1, 2, 4, 5, 23, 24 and 25

- * IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 20 OR LESS, WRITE "20" IN COLUMN 3.
- ** IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 3 OR LESS, WRITE 3" IN COLUMN 3
- *** PAY THIS TEE ONLY WHEN MULTIPLE DEPENDENT CLAIMS ARE ADDED FOR THE FIRST TIME
- *** IF NO FEE REQUIRED, ADDRESS ENVELOPE TO "BOX NON FEE AMENDMENTS"

Attached is our check for \$ to pay the fees calculated above.

Amendment Transmittal Letter Application No. 10/043,763

A Petition for Extension of Time and the required fee are enclosed.

X Other enclosures: Replacement Drawing Fig. 17 and Red-Lined Fig. 17

The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required by or to give effect to this paper to Deposit Account No. 03-1728. Please show our docket number with any charge or credit to our Deposit Account. A copy of this letter is enclosed.

Respectfully submitted,

CHRISTIE, PARKER & HALE, LLP

Bv

Reg. No. 43,693 626/795-9900

JEJ/cam

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